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P FEE TRANSMITTAL FY 2003

Complete if Known				
Application Serial Number	09/292,217			
Filing Date	April 15, 1999			
First Named Inventor	Gillies			
Group Art Unit	1644			
Examiner Name	Roark, Jessica H.			
Attorney Docket No.	LEX-004			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. Payment Enclosed:	3. ADDITIONAL FEES				
☐ Check ☐ Money Order ☐ Other	Large	Small			
	Entity	Entity			
2. The Commissioner is hereby authorized to credit	Fee	Fee	Fee Description	Fee Paid	
or charge any fee indicated below for this submission	(\$)	(\$)			
to Deposit Account No. 20-0531.					
Required Fees (copy of this sheet enclosed).	130	65	Surcharge - late filing fee or oath		
Additional fee required under 37 CFR 1.16 and 1.17.	50	25	Surcharge - late provisional filing fee or cover sheet		
Overpayment Credit.	130	130	Non-English specification		
3. Applicant claims small entity status.	2,520	2,520		TI I'M	
FEE CALCULATION	110	55	Extension for reply within first month	FCFIVED	
1. FILING FEE	410	205	Extension for reply within second	ECEVED	
I. I ILING I LL			month	-00	
Large Entity	930	465	Extension for reply within third month	ADD 0 7 2003	
Fee (\$) Fee Description Fee Paid	1450	725	Extension for reply within fourth	APR 0 7 2003	
	1970	985	Extension for reply within fifth month	2 1600 2	
750 Utility filing fee	320	160	month Extension for reply within fifth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petitions to the Commissioner	H CFNILL 10001	
330 Design filing fee	320	160	Filing a brief in support of an appeal	"''	
160 Provisional filing fee	280	140	Request for oral hearing		
	130	130	Petitions to the Commissioner		
	180	180	Submission of Information Disclosure		
Number Number Rate Amount			Statement		
Filed Extra	750	375	Filing a submission after final rejection (37 CFR 1.129(a))		
Total Claims - 20 = x \$ 18.00 =	750	375	For each additional invention to be examined (37 CFR 1.129(b))		
Independent	100	100	Certificate of Correction for		
Claims $-3 = x \$ 84.00 =$			applicant's error		
	Other fee (Sp		Request for Continued Examination	750.00	
Multiple Dependent Claim(s), if any $$280.00 =$	Other fee (Sp	pecify)			
TOTAL:					
SMALL ENTITY DISCOUNT:			•		
SUBTOTAL (1) (\$) 0.00				i	
2. AMENDMENT CLAIM FEES					
Claims Highest No. Present Rate Fee Paid			SUBTOTAL (3) (\$)	750.00	
Remaining Previously Extra					
After Amend. Paid For					
Total - = x \$ 18.00 =			SUBTOTAL (1)	0.00	
Indep = x \$ 84.00 =				0.00	
First Presentation of Multiple Dep. + \$280.00 =			SUBTOTAL (3)	750.00	
Claim			(,		
TOTAL: (\$)			_		
SMALL ENTITY DISCOUNT: (\$)					
SUBTOTAL (2) (\$)0.00			TOTAL (\$)	750.00	
CORRESPONDENCE ADDRESS	SIGNATURE BLOCK				
			Respectfully submitted,		
Direct all correspondence to:		1			
Patent Administrator Tests, Hurnvitz & Thibeault, LLP	Date: April 2 2003				
	Reg. No.: 41,418 Patrick R.H. Waller				
Poston MA 02110		17) 248-7240			
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